

SINGLE FAMILY & TWO FAMILY RESIDENTIAL PERMIT APPLICATION

CITY OF FRANKLIN BUILDING INSPECTION DEPARTMENT

9229 W. LOOMIS ROAD, FRANKLIN, WI 53132

TELEPHONE 414-425-0084 / FAX 414-425-7513

APPLICATION FOR ARCHITECTURAL BOARD

Application for Architectural Board can be made only for subdivisions and/or lots approved for building permits.

(Exception: Model homes pre-approved by Common Council.)

ITEMS NECESSARY AT TIME OF APPLICATION:

2 COPIES OF BUILDING PLANS - Showing all detail on all elevations

- All elevations **MUST BE** drawn to 1/4" scale or larger

COPY OF SITE PLAN

- Showing building location on lot – drawn to scale

\$50 APPLICATION FEE

- Cash or check made payable to City of Franklin

BUILDING PERMIT APPLICATION

Building Permits must be applied for **within 10 business days after** the approval of the Architectural Board.

ITEMS NECESSARY AT TIME OF APPLICATION:

ONE (1) ADDITIONAL COPY OF BUILDING PLANS FOR A SINGLE FAMILY RESIDENCE

(3) revised copies if Board required changes – (changes must be redrawn on plans and new plans submitted)

- All elevations drawn to 1/4" scale or larger

-OR-

TWO (2) ADDITIONAL COPIES OF BUILDING PLANS FOR A TWO FAMILY RESIDENCE

(4) revised copies if Board required changes – (changes must be redrawn on plans and new plans submitted)

- All elevations drawn to 1/4" scale or larger

-AND-

FIVE (5) PLATS OF SURVEY

- Stamped and signed by a registered land surveyor (**one MUST BE an original stamped**).
- See engineering list for complete information.

-AND-

THREE (3) COPIES OF HEAT LOSS CALCULATIONS/ENERGY WORKSHEETS

- Signature required by designer/builder.

-AND-

A DUMPSTER CONTRACT COPY (5-6 yard minimum dumpster required)

-AND-

PLAN EXAM FEE – \$250.00

- Cash or check made payable to City of Franklin

-AND-

A COMPLETED WISCONSIN UNIFORM BUILDING PERMIT APPLICATION FORM

- DILHR SBD-5823 available at our office or online at www.franklinwi.gov.

-AND-

A COPY OF CURRENT DWELLING CONTRACTOR CERTIFICATION AND DWELLING CONTRACTOR QUALIFIER CERTIFICATION CARDS REQUIRED TO BE SUBMITTED WITH EACH APPLICATION.

★★

BUILDING PERMIT FEE SCHEDULE AVAILABLE UPON REQUEST

City of Franklin Building Inspection Dept., 9229 W. Loomis Road, Franklin, WI 53132 (414) 425-0084/Fax (414) 425-7513

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73		Wisconsin Uniform Building Permit Application Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]				Application No.		Parcel No.																									
PERMIT REQUESTED		<input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other:																															
Owner's Name			Mailing Address				Tel.																										
Contractor Name & Type			Lic/Cert#		Mailing Address		Tel. & Fax																										
Dwelling Contractor (Constr.)																																	
Dwelling Contr. Qualifier					The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.																												
HVAC																																	
Electrical																																	
Plumbing																																	
PROJECT LOCATION		Lot area Sq.ft.	<input type="checkbox"/> One acre or more of soil will be disturbed	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City of		_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E/																											
Building Address			County		Subdivision Name		Lot No.		Block No.																								
Zoning District(s)		Zoning Permit No.		Setbacks:	Front ft.	Rear ft.	Left ft.	Right ft.																									
1. PROJECT		3. OCCUPANCY		6. ELECTRIC	9. HVAC EQUIP.	12. ENERGY SOURCE																											
<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Other:		<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other:		Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead 7. WALLS <input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:	<input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC <input type="checkbox"/> Fireplace <input type="checkbox"/> Other:	Fuel Space Htg Water Htg	Nat Gas LP Oil Elec Solid Solar Geo																										
2. AREA INVOLVED (sq ft)		4. CONST. TYPE		5. STORIES	8. USE	10. SEWER	11. WATER	13. HEAT LOSS																									
<table border="1"> <thead> <tr> <th></th> <th>Unit 1</th> <th>Unit 2</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Unfin. Bsmt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Living Area</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Garage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deck/ Porch</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Totals</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck/ Porch				Totals				<input type="checkbox"/> Site-Built <input type="checkbox"/> UMfd. per WI UDC <input type="checkbox"/> UMfd. per US HUD <input type="checkbox"/> Plus Basement		<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other:	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:	<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit#	<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well	BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)	
	Unit 1	Unit 2	Total																														
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Totals																																	
								14. EST. BUILDING COST w/o LAND \$																									
I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. U I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply of this form.																																	
APPROVAL CONDITIONS		This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. See attached for conditions of approval.																															
ISSUING JURISDICTION		U Town of U Village of <input type="checkbox"/> City of <input type="checkbox"/> County of <input type="checkbox"/> State--			State-Contracted Inspection Agency#:		Municipality Number of Dwelling Location																										
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:																											
Plan Review \$		Construction				Name																											
Inspection \$		HVAC																															
Wis. Permit Seal \$		Electrical				Date Tel.																											
Other \$		Plumbing																															
Total \$		Erosion Control				Cert No.																											

INSTRUCTIONS

The owner, builder or agents shall complete the application form down through the Signature of Applicant block and submit it and building plans and specifications to the enforcing jurisdiction, which is usually your municipality or county. Permit application data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local code administration. Please type or use ink and press firmly with multi-ply form.

PERMIT REQUESTED

- Check off type of Permit Requested, such as structural, HVAC, Electrical or Plumbing.
- Fill in owner's current Mailing Address and Telephone Number.
- If the project will disturb one acre or more of soil, the project is subject to the additional erosion control and stormwater provisions of ch. NR 151 of the WI Administrative Code. Checking this box will satisfy the related notification requirements of ch. NR 216.
- Fill in Contractor and Contractor Qualifier Information. Per s. 101.654 (1) WI Stats., an individual taking out an erosion control or construction permit shall enter his or her dwelling contractor certificate number, and name and certificate number of the dwelling contractor qualifier employed by the contractor, unless they reside or will reside in the dwelling. Per s. 101.63 (7) Wis. Stats., the master plumber name and license number must be entered before issuing a plumbing permit.

PROJECT LOCATION

- Fill in Building Address (number and street or sufficient information so that the building inspector can locate the site).
- Local zoning, land use and flood plain requirements must be satisfied before a building permit can be issued. County approval may be necessary.
- Fill in Zoning District, lot area and required building setbacks.

PROJECT DATA - Fill in all numbered project data blocks (1-14) with the required information. All data blocks must be filled in, including the following:

2. Area (involved in project):
 - Basements - include unfinished area only
 - Living area - include any finished area including finished areas in basements
 - Two-family dwellings - include separate and total combined areas
3. Occupancy - Check only "Single-Family" or "Two-Family" if that is what is being worked on. In other words, do not check either of these two blocks if only a new detached garage is being built, even if it serves a one or two family dwelling. Instead, check "Garage" and number of stalls. If the project is a community based residential facility serving 3 to 8 residents, it is considered a single-family dwelling.
9. HVAC Equipment - Check only the major source of heat, plus central air conditioning if present. Only check "Radiant Baseboard" if there is no central source of heat.
10. Plumbing - A building permit cannot be issued until a sanitary permit has been issued for any new or affected existing private onsite wastewater treatment system.
14. Estimated Cost - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.

SIGNATURE – The owner or the contractor's authorized agent shall sign and date this application form. If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

CONDITIONS OF APPROVAL - The authority having jurisdiction uses this section to state any conditions that must be complied with pursuant to issuing the building permit.

ISSUING JURISDICTION: This must be completed by the authority having jurisdiction.

- Check off Jurisdiction Status, such as town, village, city, county or state and fill in Municipality Name
- Fill in State Inspection Agency number only if working under state inspection jurisdiction.
- Fill in Municipality Number of Dwelling Location
- Check off type of Permit Issued, such as construction, HVAC, electrical or plumbing.
- Fill in Wisconsin Uniform Permit Seal Number, if project is a new one- or two-family dwelling.
- Fill in Name and Inspector Certification Number of person reviewing building plans and date building permit issued.

INSPECTORS: PLEASE RETURN SECOND PLY WITHIN 30 DAYS AFTER ISSUANCE TO (You may fold along the dashed lines and insert this form into a window envelope.):

Industry Services Division
PO Box 7302
Madison WI 53707-7302

(Part of Ply 4 for Applicants)

Cautionary Statement to Owners Obtaining Building Permits

101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:

If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two- family dwelling code or an ordinance enacted under sub. (1) (a), because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

Cautionary Statement to Contractors for Projects Involving Building Built Before 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608)261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance

Wetlands Notice to Permit Applicants

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

Additional Responsibilities for Owners of Projects Disturbing One or More Acre of Soil

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

Owner's Signature: _____ Date:

Contractor Credential Requirements

All contractors shall possess an appropriate contractor credential issued by the Wisconsin Division of Safety and Buildings. Contractors are also required to only subcontract with contractors that hold the appropriate contractor credentia

City of Franklin Building Inspection Department

9229 W. Loomis Road, Franklin, WI 53132

Telephone #414-425-0084 / Fax #414-425-7513

SINGLE FAMILY & TWO FAMILY RESIDENTIAL BUILDING PERMIT FEES 2014

Plan Review Fee \$250

**The following fees are assessed when the permit application has been processed.
Fees are paid at the time of permit pickup.**

Bldg. Fee	\$0.32/Sq. Ft. (includes attached garage, not unfinished basement)
Erosion Control	\$ 150
State Seal	\$ 40
Occupancy	\$ 50
House Numbers	(4 digit) - \$7.70 (5 digit) - \$9.20
Fireplace	\$ 45
Deck	\$ 50
Impact Fee	CALL BUILDING INSPECTION FOR 2014 FEES
Sewer Connection Fee	\$ 600
Technology Fee	\$ 5

**PLEASE NOTE: THESE FEES ARE SUBJECT TO CHANGE AT ANY TIME.
PLEASE CALL TO CONFIRM CURRENT FEES.**

***Rev. 10-10-13 Ordinance No. 2013-2117**

*****Drive Approach, Culvert (contact the Engineering Department), Plumbing, Electrical,
and HVAC permits are not included in these fees. Additional permits are required*****

[insp./handouts/2013 SF PERMIT FEES](http://insp./handouts/2013%20SF%20PERMIT%20FEES)

[insp./handouts/2013 SF PERMIT FEES](http://insp./handouts/2013%20SF%20PERMIT%20FEES)

**CITY OF FRANKLIN
9229 W. LOOMIS ROAD
ARCHITECTURAL REVIEW BOARD
MEETING DATES
JANUARY THROUGH APRIL 2014**



**MEETINGS HELD AT:
7:00 P.M.**

**IN THE INSPECTION CONFERENCE ROOM
UPPER LEVEL**

APPLICATION DEADLINE DATES -- 4:00p.m.		MEETING DATES -- 7:00p.m.
JANUARY 2, 2014	●●●●●●●●●●	JANUARY 9, 2014
JANUARY 16, 2014	●●●●●●●●●●	JANUARY 23, 2014
FEBRUARY 6, 2014	●●●●●●●●●●	FEBRUARY 13, 2014
FEBRUARY 20, 2014	●●●●●●●●●●	FEBRUARY 27, 2014
MARCH 6, 2014	●●●●●●●●●●	MARCH 13, 2014
MARCH 20, 2014	●●●●●●●●●●	MARCH 27, 2014
APRIL 3, 2014	●●●●●●●●●●	APRIL 10, 2014
APRIL 17, 2014	●●●●●●●●●●	APRIL 24, 2014

**CITY OF FRANKLIN
9229 W. LOOMIS ROAD
ARCHITECTURAL REVIEW BOARD
MEETING DATES
MAY THROUGH AUGUST 2014**



**MEETINGS HELD AT:
7:00 P.M.**

**IN THE INSPECTION CONFERENCE ROOM
UPPER LEVEL**

APPLICATION DEADLINE DATES -- 4:00p.m.		MEETING DATES -- 7:00p.m.
MAY 1, 2014	.....	MAY 8, 2014
MAY 15, 2014	.....	MAY 22, 2014
JUNE 5, 2014	.....	JUNE 12, 2014
JUNE 19, 2014	.....	JUNE 26, 2014
JULY 3, 2014	.....	JULY 10, 2014
JULY 17, 2014	.....	JULY 24, 2014
AUGUST 7, 2014	.....	AUGUST 14, 2014
AUGUST 21, 2014	.....	AUGUST 28, 2014

**CITY OF FRANKLIN
9229 W. LOOMIS ROAD
ARCHITECTURAL REVIEW BOARD
MEETING DATES
SEPTEMBER THROUGH DECEMBER 2014**



**MEETINGS HELD AT:
7:00 P.M.**

**IN THE INSPECTION CONFERENCE ROOM
UPPER LEVEL**

APPLICATION DEADLINE DATES -- 4:00p.m.		MEETING DATES -- 7:00p.m.
SEPTEMBER 4, 2014	●●●●●●●●●●●●●●●●	SEPTEMBER 11, 2014
SEPTEMBER 18, 2014	●●●●●●●●●●●●●●●●	SEPTEMBER 25, 2014
OCTOBER 2, 2014	●●●●●●●●●●●●●●●●	OCTOBER 09, 2014
OCTOBER 16, 2014	●●●●●●●●●●●●●●●●	OCTOBER 23, 2014
OCTOBER 30, 2014	●●●●●●●●●●●●●●●●	NOVEMBER 6, 2014*
NOVEMBER 13, 2014	●●●●●●●●●●●●●●●●	NOVEMBER 20, 2014*
NOVEMBER 26, 2014	●●●●●●●●●●●●●●●●	DECEMBER 4, 2014*
DECEMBER 11, 2014	●●●●●●●●●●●●●●●●	DECEMBER 18, 2014*

City of Franklin
9229 W. Loomis Road
Franklin, WI 53132

ARCHITECTURAL BOARD REVIEW

Residential Application Fee \$50
Sign Application Fee \$40

www.franklinwi.gov
Phone (414) 425-0084
Fax (414) 425-7513

Please print or type information:

Application No.:

BUILDING ADDRESS:	CORNER LOT	YES	NO
IF NEW DWELLING: DRIVE APPROACH		CULVERT	
IF NO ADDRESS: SUBDIVISION NAME:	LOT NO. _____	BLOCK NO. _____	
OWNER'S NAME(S):	EMAIL:		
MAILING ADDRESS:	CITY:	ZIP:	
TELEPHONE #:	CELL PHONE #:		
CONTRACTOR'S NAME:	EMAIL:		
MAILING ADDRESS:	CITY:	ZIP:	
TELEPHONE #:	FAX #:	CELL PHONE#:	

Applicant's Signature _____

Date _____

APPLICATION TYPE/DESCRIPTION: _____
(NEW HOME, ADDITION, ETC.)

ARCHITECTURAL BOARD MEETING DATE: _____ AGENDA ITEM #: _____

☐ Approved ☐ Approved w/changes ☐ Denied ☐ Tabled to _____

Comments: _____

Motion by: ☐ Jost ☐ Kazmierski ☐ Bollis ☐ Werner ☐ Juerisson ☐ Cieszynski ☐ Arndt ☐ Naujock

Seconded by: ☐ Jost ☐ Kazmierski ☐ Bollis ☐ Werner ☐ Juerisson ☐ Cieszynski ☐ Arndt ☐ Naujock

ROLL CALL VOTE:			
NAME	AYE	NO	ABSTAIN
Jost, Louis			
Kazmierski, Ken			
Bollis, Gregory			
Werner, Vance			
Juerisson, Ted			
Baumgart, Fred (Inspector)			
Cieszynski, David (Alternate)			
Arndt, Mark (Alternate)			
Naujock, Walter (Chairman)			

INSPECTOR'S FIELD REVIEW for _____

by: _____

- ☐ **DESIGN REPETITION:** A building design may not be repeated within four lots of an existing building. This shall apply to all buildings, whether or not they are constructed by the same builder.

- ☐ **FOUNDATIONS BELOW OVERHANGING BAYS:** Buildings shall be designed with foundations below all bays which overhang the building foundation.

- ☐ **CORNER SIDE ELEVATIONS:** Buildings located on corner lots shall continue the major front elevation design elements around the corner elevation.

- ☐ **BLANK SIDE ELEVATIONS:** Building side elevations which have only siding used on these elevations as element/s shall provide some additional architectural design element/s to break up the plane of the wall. This may be done by the addition of window/s, gable end wall treatments, siding design and accent panels or other architectural design treatments consistent with the principal building design.

- ☐ **SCALE OF BUILDING ELEVATIONS:** Building plan elevations shall be submitted to a scale not less than 1/4 inch equals one foot (1/4" = 1').

- ☐ **ELEVATION DETAIL:** Building plans shall be submitted with all detail drawn in on each elevation. Plans drawn with partial building details drawn in will be returned to the builder/owner for redrafting. Red-line drawing will only be accepted for minor detail changes, major changes will require redrafting of the building elevations.

- ☐ **ENCLOSURE OF METAL FURNACE VENTS:** All chimney and fireplace vents shall be enclosed in a chase constructed of materials similar to those materials used on the building elevations. The Board will also accept metal housings designed by the vent manufacturer to enclose the chimney vents.

☐ **WILL NEED A DRIVE APPROACH**

☐ **WILL NEED A CULVERT**

☐ **APPROVAL TIME PASSED**

☐ **HOUSE SQUARE FOOTAGE AND/OR GARAGE SQUARE FOOTAGE CHANGED**

☐ _____